Fill in this information to identify your case:						
Debtor 1	Susan A. Noviello					
Debtor 2 (Spouse, if filing)						
United States B	ankruptcy Court for the:	District of New Jersey, Trenton Division				
Case number (if known)	3:22-bk-15727					

Check	as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
-	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						Colu Debt	mn A or 1	 nn B or 2 or iling spouse
Your gross wages, salary, tipayroll deductions).	ps, bonuses, over	time, a	and co	ommissions (bef	ore all	\$	1,306.50	\$ 0.00
Alimony and maintenance p Column B is filled in.	ayments. Do not in	nclude	payme	ents from a spou	se if	\$	0.00	\$ 0.00
All amounts from any sourc of you or your dependents, from an unmarried partner, me roommates. Do not include pa listed on line 3	including child su mbers of your house	pport. ehold,	Includ your d	le regular contrib ependents, parer	utions its, and	\$	0.00	\$ 0.00
Net income from operating a business, profession, or far	D 14 4		De	ebtor 2				
Gross receipts (before all deductions)	\$	0.00	\$	18,333.00				
Ordinary and necessary operating expenses	-\$	0.00	-\$	-13,688.00				
Net monthly income from a business, profession, or farm	\$	0.00	\$	4,645.00	Copy here -> \$	s	0.00	\$ 4,645.00
Net income from rental and	other real property	y	Debto	r 1				
Gross receipts (before all dedu	uctions)		\$.	0.00				
Ordinary and necessary operate	ting expenses		-\$	0.00				
Net monthly income from rent	al or other real prop	perty	\$	0.00 Copy	here ->	\$	0.00	\$ 0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (*if known*) **3:22-bk-15727**

	<u>-</u>								-
					Column A Debtor 1		Column B Debtor 2 o	or	
7.	Interest. d	lividends, and royalties			\$	0.00	\$	0.00	
		ment compensation			\$	0.00	\$	0.00	
		er the amount if you contend that the amo curity Act. Instead, list it here:	unt received was a benefi	it under the					
	For you		\$	0.00					
	For your	spouse		0.00					
	Pension of under the Strictude any Government a member 61 of title 1 of retired p	or retirement income. Do not include any Social Security Act. Also, except as stated or compensation, pension, pay, annuity, or not in connection with a disability, combatrof the uniformed services. If you received 0, then include that pay only to the extent ay to which you would otherwise be entitled or than chapter 61 of that title.	amount received that wa in the next sentence, do allowance paid by the Un elated injury or disability, any retired pay paid unde that it does not exceed th	not nited States or death of er chapter ne amount	\$	0.00	\$	0.00	
	Do not incl as a victim terrorism; of States Gov death of a	om all other sources not listed above. ude any benefits received under the Socia of a war crime, a crime against humanity, or compensation, pension, pay, annuity, or vernment in connection with a disability, comember of the uniformed services. If neceivage and put the total below.	al Security Act; payments or international or domes allowance paid by the U ombat-related injury or dis	received stic nited sability, or					
					\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
	Т	otal amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.		your total average monthly income. A nn. Then add the total for Column A to the		\$	1,306.50	+ \$	4,645.00		5,951.50 tal average
Part		ermine How to Measure Your Deduction						Φ.	5.054.50
		r total average monthly income from li the marital adjustment. Check one:	ine 11.					\$	5,951.50
	_	are not married. Fill in 0 below.							
	☐ You a	are married and your spouse is filing with y	ou. Fill in 0 below.						
	■ You a	are married and your spouse is not filing w	ith you.						
		the amount of the income listed in line 1 as payment of the spouse's tax liability or						s of you or	your dependent
	a sep	v, specify the basis for excluding this inco arate page.		come devote	ed to each pu	rpose. I	f necessary, lis	t additiona	adjustments on
	If this	adjustment does not apply, enter 0 below	'.	æ					
				_		_			
				·		_			
						_			
		Total		\$	0.0	00	Copy here=>		0.00
14.	Your cur	rent monthly income. Subtract line 13	from line 12.					\$	5,951.50
15.	Calculate	e your current monthly income for the	year. Follow these steps	s:					
	15a. Co	py line 14 her e⇒						\$	5,951.50

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Noviello, Susan A.

Debtor 1

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Debto	or 1	Nov	riello, Susan A.		Case number (if known)	3:22-bk-157	27
		М	ultiply line 15a by 12 (the number of months in	n a year).		Г	x 12
	15	b. Ti	ne result is your current monthly income for the	year for this part of the	form		71,418.00
16.	Cald	culate	the median family income that applies to y	ou. Follow these steps	:		
	16a.	. Fill in	the state in which you live.	NJ			
	16b	. Fill ir	n the number of people in your household.	6			
	16c.	To fi	n the median family income for your state and nd a list of applicable median income amount: uctions for this form. This list may also be avail	s, go online using the li			160,457.00
17.	How	v do t	he lines compare?				
	17a.		Line 15b is less than or equal to line 16c. (U.S.C. § 1325(b)(3). Go to Part 3. Do NO		•		determined under 11
	17b.	. [Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 at	ulation of Your Dispos			
Part	3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Сор	у уо	ur total average monthly income from line 1	1		\$	5,951.50
19.	that inco	calcu me, c	ne marital adjustment if it applies. If you are lating the commitment period under 11 U.S.C. opy the amount from line 13.	§ 1325(b)(4) allows you		nd - \$	0.00
	19b.	. Subt	tract line 19a from line 18.			\$	5,951.50
20.	Cald	culate	your current monthly income for the year.	Follow these steps:			
	20a.	Copy	y line 19b			9	5,951.50
		Multi	iply by 12 (the number of months in a year).			Γ	x 12
	20b	. The	result is your current monthly income for the ye	ar for this part of the fo	m	Ę	\$71,418.00
	20c.	. Copy	y the median family income for your state and s	ize of household from li	ne 16c		160,457.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwis is 3 years. Go to Part 4.	se ordered by the court,	on the top of page 1 of this form, of	check box 3, TI	he commitment period
			Line 20b is more than or equal to line 20c. Unl commitment period is 5 years. Go to Part 4.	ess otherwise ordered b	by the court, on the top of page 1 o	of this form, che	eck box 4, The
Part	By s // /s/ Su Sig	igning Sus Isan gnatur Au	gn Below g here, under penalty of perjury I declare that th an A. Noviello A. Noviello e of Debtor 1 gust 9, 2022	e information on this sta	atement and in any attachments is	true and correc	ct.
	If yo		1 / DD / YYYY cked 17a, do NOT fill out or file Form 122C-2.				
	-		cked 17b, fill out Form 122C-2 and file it with		that form, copy your current mon	thly income fro	om line 14 above.

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		D O O O O I I I I	one rago rondo	
Fill in	this information to identi	fy your case:		
Debtor 1	Susan A. Noviell	0		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JE	RSEY, TRENTON DIVISION	
Case number	3:22-bk-15727			
(if known)				☐ Check if this is an amended filing
				 _

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you fill your original forms, you must fill out a new Summary and check the box at the top of this page.

Dar	t 1: Summarize Your Assets		
rai	CI. Summanze Four Assets	Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	537,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,779.36
	1c. Copy line 63, Total of all property on Schedule A/B	\$	557,779.36
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	263,546.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	51,556.30
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	46,022.07
	Your total liabilities	\$	361,124.43
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	5,162.66
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,224.02
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	ner schedu	ules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.	ersonal, fa	mily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bo.	x and sub	mit this form to the

court with your other schedules.

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Debtor 1 Noviello, Susan A. Case number (if known) 3:22-bk-15727

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,951.50

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	51,556.36
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	51,556.36

Eilad 08/00/22 Entered 08/00/22 21:20:50

		Г	Document	t Page 6 of 33			
Fill in this i	information to identify y						
Debtor 1	Susan A. Noviello						
-	First Name	Middle Nan	ne	Last Name	}		
Debtor 2 (Spouse, if filing)	First Name	Middle Nam	ne	Last Name			
United States Bankr	ruptcy Court for the: D	ISTRICT OF	NEW JERSE	Y, TRENTON DIVISION			
Case number 3:2	— 22-bk-15727				}		☐ Check if this is an
3.2	:Z-DR-13121						amended filing
n each category, sepa hink it fits best. Be as	A/B: Prope arately list and describe its s complete and accurate a pace is needed, attach a si	tems. List an as as possible. If t	two married pe	. If an asset fits in more than on cople are filing together, both are n the top of any additional page	equally respons	ible for sup	plying correct
		Other I	D F 4 - 4 - V.	u Own or Have an Interest In			
No. Go to Part 2. Yes. Where is the street address, if av	ne property?	V	Single-far	perty? Check all that apply mily home r multi-unit building nium or cooperative	the amount of	fany secured	ims or exemptions. Put I claims on <i>Schedule D:</i> is Secured by Property.
	NJ 08527	7-4637	_	tured or mobile home	Current value		Current value of the
Jackson City	State ZIP	Code	=	nt property	entire proper \$537	•	portion you own?
Jackson City	State ZIP	P Code	☐ Investmen ☐ Timeshar ☐ Other	erest in the property? Check one	\$537 Describe the	,000.00 nature of yo simple, tena if known.	

you have attached for Part 1. Write that number here.....

\$537,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Deb	otor 1 N	loviello, Susan A.		ase number (if known)	3:22-bk-15727
3. C	ars, vans,	trucks, tractors, sport	utility vehicles, motorcycles		
_	1				
_	l No				
-	Yes				
				Do not doduct con	urad alaima ar ayamatiana Dut
3.1	Make:	Hyundai	Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on Schedule D:
	Model:	Elantra	Debtor 1 only	Creditors Who Hav	re Claims Secured by Property.
	Year:	2018	Debtor 2 only	Current value of t	
		nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other ini	ormation:	At least one of the debtors and another		
			☐ Check if this is community property	\$13,670	.00 \$13,670.00
			(see instructions)		
Ex			ATVs and other recreational vehicles, other vehicles, and resonal watercraft, fishing vessels, snowmobiles, motorcycle acc		
			n you own for all of your entries from Part 2, including an te that number here		\$13,670.00
		be Your Personal and Ho			
Do y	you own o	r have any legal or equ	uitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	=xamples: I ☐ No ☐ Yes. De	scribe	re, linens, china, kitchenware nold Furnishings rith non-debtor husband, Frank Noviello		\$1,500.00
E	,	including cell phones, cascribe Electro	udio, video, stereo, and digital equipment; computers, printers, ameras, media players, games onics rith non-debtor husband, Frank Noviello	scanners; music collect	tions; electronic devices
E		Antiques and figurines; p collections, memorabilia	paintings, prints, or other artwork; books, pictures, or other art o a, collectibles	bjects; stamp, coin, or b	aseball card collections; other
E	Examples:	instruments	s ercise, and other hobby equipment; bicycles, pool tables, golf c	lubs, skis; canoes and k	ayaks; carpentry tools; musical
	Firearms Examples: ■ No	Pistols, rifles, shotguns	s, ammunition, and related equipment		
_	■ NO] Yes. De	scribe			

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Debtor 1 Nov	<u>riello, Susan A</u>	\ <u>.</u>	Case number (if known)	3:22-bk-15727
1. Clothes				
	veryday clothes, fu	ırs, leather coats, designer w	ear, shoes, accessories	
□ No ·		-		
Yes. Descri	ihe			
- Tes. Descri		ring Apperel		¢250.00
	wea	ring Apparel		\$250.00
12. Jewelry				
	vervdav iewelry co	ostume iewelry engagement	rings, wedding rings, heirloom jewelry, watches, gems, gold,	silver
□ No	, , , , ,	,otamo jemeny, engagement	imige, measing imige, nemeent jeneny, materiee, gene, gene,	S S.
Yes. Descri	1			
Yes. Descri				\$4 7 00 00
	Jew	elry		\$1,700.00
12. Non form only	mala			
3. Non-farm ani	mais ogs, cats, birds, h	oreoe		
·	Jys, cais, bilus, li	orses		
■ No				
Yes. Descr	ibe			
4. Any other per	rsonal and hous	ehold items you did not alı	ready list, including any health aids you did not list	
■ No				
☐ Yes. Give s	pecific information	n		
	•			
15. Add the dol	lar value of all o	f your entries from Part 3,	including any entries for pages you have attached for	¢4.250.00
Part 3. Write	e that number he	ere		\$4,250.00
Part 4: Describe	Your Financial Ass	ets		
Do you own or h	ave any legal or	equitable interest in any o	f the following?	Current value of the
				portion you own?
				Do not deduct secured
				claims or exemptions.
6. Cash				
	onev vou have in v	our wallet, in your home, in a	safe deposit box, and on hand when you file your petition	
□ No	, , ,	, , , ,	, , , , , , , , , , , , , , , ,	
_				
■ Yes				450.00
			Cash on Hand	\$50.00
7. Deposits of m			autification of classical phonon in available writing burdlesses because	and attention
			ertificates of deposit; shares in credit unions, brokerage hous the same institution, list each.	ses, and other similar
	istitutions. Ii you i	lave multiple accounts with	the same institution, list each.	
□ No			Institution and an	
Yes			Institution name:	
			TD Bank Checking (8463)	
			Joint with non-debtor mother, Joyce	
			Thompson - Listed as account holder only in	
			the event of an emergency. This is not	
	17.	1. Checking Account	Debtor's money.	\$0.00
			TD Bank Student Checking Account (1990)	
			Joint with non-debtor daugther, Emily	
			Noviello - Listed as account holder only in	
	17.2	2. Checking Account	the event of an emergency. This is not	\$0.00
			Debtor's money.	
			TD Bank Student Charling (5540)	
			TD Bank Student Checking (5519)	
			Joint with non-debtor daughter, Haley	
			Noviello - Listed as account holder only in	
			the event of an emergency. This is not	* 2.22
	17.3	3. Checking Account	Debtor's money.	\$0.00

Official Form 106A/B

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Yes........... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

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De	ebtor 1	Noviello, Susan A.	Case number (if known)	3:22-bk-15727
25.	Trusts,	equitable or future interests in property (other than anything listed in line 1), and	rights or powers exerc	isable for your benefit
		Give specific information about them		
26.	Examp	s, copyrights, trademarks, trade secrets, and other intellectual property les: Internet domain names, websites, proceeds from royalties and licensing agreements		
	■ No □ Yes.	Give specific information about them		
27.		es, franchises, and other general intangibles eles: Building permits, exclusive licenses, cooperative association holdings, liquor licenses	, professional licenses	
	☐ Yes.	Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	unds owed to you		
	■ No □ Yes.	Give specific information about them, including whether you already filed the returns and t	he tax years	
29.		support les: Past due or lump sum alimony, spousal support, child support, maintenance, divord	ce settlement, property s	ettlement
	☐ Yes.	Give specific information		
30.		imounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pa unpaid loans you made to someone else	ay, workers' compensati	on, Social Security benefits;
	■ No □ Yes	Give specific information		
31.		ts in insurance policies		
	Examp ■ No	oles: Health, disability, or life insurance; health savings account (HSA); credit, homeowner	's, or renter's insurance	
	_	Name the insurance company of each policy and list its value. Company name: Beneficia	nry:	Surrender or refund value:
32.	If you a died.	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are curr	rently entitled to receive p	
	■ No □ Yes.	Give specific information		
33.		against third parties, whether or not you have filed a lawsuit or made a demand folles: Accidents, employment disputes, insurance claims, or rights to sue	or payment	
	■ No □ Yes	Describe each claim		
34.		ontingent and unliquidated claims of every nature, including counterclaims of the	e debtor and rights to se	et off claims
	■ No □ Yes	Describe each claim		
35.		ancial assets you did not already list		
	■ No			
	⊔ res.	Give specific information	r	
36		he dollar value of all of your entries from Part 4, including any entries for pages your street when the description is the common that the description is the common that the common that the description is the common that		\$2,859.36

Official Form 106A/B Schedule A/B: Property

page 5

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Debtor	Noviello, Susan A.		Case number (if known)	3:22-bk-15727
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	roet in list any roal ostat	ea in Part 1	
Tart J.	Describe Any Business-Related Froperty Fou Own of Have all Inter	rest III. List any real estat	te iii i dit i.	
	you own or have any legal or equitable interest in any business-relate	ed property?		
	p. Go to Part 6.			
∐ Y€	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interes	t In.	
46. Do	you own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
Ex ■ N	you have other property of any kind you did not already list? camples: Season tickets, country club membership No Yes. Give specific information	?		
54. A	dd the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P	art 1: Total real estate, line 2			\$537,000.00
56. P	art 2: Total vehicles, line 5	\$13,670.00		
57. P	art 3: Total personal and household items, line 15	\$4,250.00		
58. P	art 4: Total financial assets, line 36	\$2,859.36		
59. P	art 5: Total business-related property, line 45	\$0.00		
60. P	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54 +	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$20,779.36	Copy personal property to	tal \$20,779.36

\$557,779.36

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

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Fill in this	s information to identify	y your case:		
Debtor 1	Susan A. Noviello			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF NEW JE	RSEY, TRENTON DIVISION	
Case number (if known)	3:22-bk-15727			Charlett this is an
(II KIIOWII)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming?	? Check one only, even	if you	r spouse is filing with you.					
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exer	npt. f	ill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	•	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	573 Freehold Rd	\$537,000.00		\$27,900.00	11 USC § 522(d)(1)				
	Jackson NJ, 08527-4637 County: Ocean Line from Schedule A/B 1.1			100% of fair market value, up to any applicable statutory limit					
	570 Facel and D.J.	\$537,000.00		\$1,120.00	11 USC § 522(d)(5)				
	573 Freehold Rd Jackson NJ, 08527-4637 County: Ocean Line from Schedule A/B 1.1			100% of fair market value, up to any applicable statutory limit					
	Hyundai Elantra	\$13,670.00		\$4,450.00	11 USC § 522(d)(2)				
	2018 Line from Schedule A/B 3.1			100% of fair market value, up to any applicable statutory limit					
	Household Furnishings Joint with non-debtor husband,	\$1,500.00		\$1,500.00	11 USC § 522(d)(3)				
	Frank Noviello Line from Schedule A/B 6.1			100% of fair market value, up to any applicable statutory limit					
	Electronics	\$800.00		\$800.00	11 USC § 522(d)(3)				
	Joint with non-debtor husband, Frank Noviello Line from Schedule A/B 7.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

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De	ebtor 1 Noviello, Susan A.			Case number (if known)	3:22-bk-15727
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Wearing Apparel Line from Schedule A/B: 11.1	\$250.00		\$250.00 100% of fair market value, up to	11 USC § 522(d)(3)
				any applicable statutory limit	
	Jewelry Line from Schedule A/B: 12.1	\$1,700.00		\$1,700.00	11 USC § 522(d)(4)
	Zino nom estredato / (Z. 121)			100% of fair market value, up to any applicable statutory limit	
	Cash on Hand Line from Schedule A/B 16.1	\$50.00		\$50.00	11 USC § 522(d)(5)
	Life from Schedule A/D. 19.1			100% of fair market value, up to any applicable statutory limit	
	TD Bank Checking Account (3617) Joint with non-debtor husband	\$50.00		\$50.00	11 USC § 522(d)(5)
	Frank S. Noviello Line from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	
	PNC Bank Checking Account (9611) Joint with non-debtor Husband,	\$100.00		\$100.00	11 USC § 522(d)(5)
	Frank S. Noviello Line from Schedule A/B: 17.6			100% of fair market value, up to any applicable statutory limit	
	TD Bank Cehcking Account (3617) Joint with non-debtor Husband,	\$5.00		\$5.00	11 USC § 522(d)(5)
	Frank S. Noviello Line from Schedule A/B: 17.7			100% of fair market value, up to any applicable statutory limit	
	Merrill Lynch Retirement Account Listed for Information Purposes	\$2,654.36		\$2,654.36	11 USC § 522(d)(12)
	Only Not Property of the Estate See In Re Yuhas, 104 F.3d 612 (3rd Cir. 1997) Line from Schedule A/B 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3 y ■ No □ Yes. Did you acquire the property covered	years after that for case	s filed	,	
	□ No □ Yes				

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Fill in th	is information to identi	fy your case:		
Debtor 1	Susan A. Noviell	0		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEI	RSEY, TRENTON DIVISION	
_	3:22-bk-15727			
(if known)				☐ Check
				ameno

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property(Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Hyundai Motor Finance Attn: Bankruptcy PO Box 20829 Fountain Valley, CA 92728-0829	Installment account opened 11/1/2019 - 2020 Hyundai Tucson Credit Limit: \$11,766.00, Remaining Balance: \$2,614.00 - This is daughter's vehicle and she makes the payments.

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		Docume	ent Page 15 of 33	
	Fill in this information to identi	fy your case:		
Debtor 1	Susan A. Noviell			
Debioi i	First Name	Middle Name	Last Name	\
Debtor 2	!			
(Spouse if,		Middle Name	Last Name	
United S	states Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, TRENTON DIVISION	
Ormod O	nates Barma aproy Count for the			
Case nu	mber 3:22-bk-15727			
(if known)				☐ Check if this is an
				amended filing
Oπ: -:	al Farma 40011			
	al Form 106H			
Sche	dule H: Your Cod	ebtors		12/15
Codebto	rs are people or entities who a	re also liable for any debt	s you may have. Be as complete and acc	urate as possible. If two married people
are filing	together, both are equally resp	ponsible for supplying co	errect information. If more space is neede	d, copy the Additional Page, fill it out,
			ional Page to this page. On the top of any	Additional Pages, write your name and
case nun	nber (if known). Answer every	question.		
1. D	o vou have any codebtors? (If	vou are filing a joint case, d	o not list either spouse as a codebtor.	
	- ,	,		
	lo			
■ Y	es			
			operty state or territory? (Community prop	erty states and territories include Arizona,
Call	fornia, idano, Louisiana, Nevada	, New Mexico, Puerto Rico	, Texas, Washington, and Wisconsin.)	
■ N	lo. Go to line 3.			
	es. Did your spouse, former spou	ise or legal equivalent live v	with you at the time?	
	cs. Dia your spouse, former spou	30, or logal equivalent live v	with you at the time:	
			spouse as a codebtor if your spouse is fil	
			or cosigner. Make sure you have listed the Official Form 106G). Use Schedule D, Sch	
	umn 2.	Tooler, or Schedule G	Official Form 1000). Ose Schedule D, Sch	edule E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and Z	ZIP Code		e creditor to whom you owe the debt
	Name, Number, Offeet, Oity, Otate and 2	.ii Oode	Check all Sche	edules that apply:
3.1	Danielle Noviello		☐ Schedule	D, line
	573 Freehold Rd		■ Schedule	E/F, line 4.25
	Jackson, NJ 08527-4637		☐ Schedule	
			Hyundai Mo	
			nyunuu me	io. i manos
2.2	Frank Noviello		□ Oak a dula	D. En -
3.2	573 Freehold Rd			D, line
	Jackson, NJ 08527-4637			E/F, line2.1
	545K55H, NO 55521 4551		□ Schedule	
			Internal Rev	renue Service
3.3	Joyce Thompson			D. line. 0.4
0.0	573 Freehold Rd			D, line
	Jackson, NJ 08527-4637			E/F, line
	530110011j 110 00021 T001		☐ Schedule	
			Quicken Loa	ans

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Debtor 1	Noviello, Susan A.	Case number (if known)	3:22-bk-15727
	Additional Page to List More Codebtors		
•	Column 1: Your codebtor	Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
3.4	Danielle Noviello 573 Freehold Rd Jackson, NJ 08527-4637	☐ Schedule D,☐ Schedule E/☐ Schedule G☐ Hyundai Moto	F, line 2.1

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	in this information to identify your captor 1 Susan A. No								
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the:	DISTRICT OF NEW J	ERSEY, TRENTON	DIVISION	<u></u>				
	3:22-bk-15727					Check if this is An amendo A supplem	ed filing ent showing		chapter 13
Of	fficial Form 106I					income as		ving date:	
	chedule I: Your Inco	me				MM / DD/ `	YYYY		12/1
sup _l spoi	s complete and accurate as possiblying correct information. If you ause. If you are separated and your ch a separate sheet to this form. O Describe Employment	re married and not filing spouse is not filing with	g jointly, and your h you, do not inclu	spouse is de informa	livir atior	ng with you, inclu n about your spou	de informa ise. If more	ation about ye e space is ne	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-fil	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status*	■ Employed □ Not employed			■ Emp	oyed employed		
	employers.	Occupation	See Schedule	Attached	<u>t</u>	Contra	ctor - Se	If Employe	d
	Include part-time, seasonal, or self-employed work.	Employer's name					lo Contra leling, LL	cting and	
	Occupation may include student or homemaker, if it applies.	Employer's address					eehold Ro on, NJ 08	d 527-4637	
		How long employed th		ttachment	for	Additional Emplo	5 years yment Info	rmation	
Par	Give Details About Mon	thly Income							
	mate monthly income as of the dates you are separated.	te you file this form. If yo	ou have nothing to re	eport for an	y line	e, write \$0 in the sp	ace. Includ	e your non-filir	ng spouse
	u or your non-filing spouse have more e, attach a separate sheet to this forn		oine the information	for all empl	oyers	s for that person on	the lines be	elow. If you ne	eed more
						For Debtor 1		btor 2 or ng spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	603.00	\$	0.00	
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	603.00	\$	0.00	

Official Form 106l Schedule I: Your Income page 1

Debt	or 1 _	Noviello, Susan A.	_	Cas	e number (if known)	3:22-bk-15	727	
					r Debtor 1	For Debtor		
		y line 4 here	4.	\$_	603.00	\$	0.00	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	60.34	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.	\$ _	25.00	\$	0.00	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	-
	5e.	Insurance	5e.	\$ -	0.00	\$	0.00	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	-
	5g.	Union dues	5g.	\$	0.00	\$	0.00	•
	5h.	Other deductions. Specify:	5h.	+ \$ _	0.00	+ \$	0.00	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	85.34	\$	0.00	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	517.66	\$	0.00	_
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$ 4	.645.00	
	8b.	Interest and dividends	8b.	· -	0.00	\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	00.	* -	0.00		0.00	-
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$_	0.00	\$	0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	-
	8h.	Other monthly income. Specify:	8h.	+ \$	0.00	+ \$	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$	4,645.00	<u> </u>
10	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$	517.66 + \$	4,645.00]_[\$	5,162.66
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-	317.00	+,0+3.00	$\exists \exists \vdash \vdash$	3,102.00
4.4		<u> </u>	,					
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your defineds or relatives. ot include any amounts already included in lines 2-10 or amounts that are not available:	pende		·		+\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain			•	40	\$	5,162.66
13.	Do y □	ou expect an increase or decrease within the year after you file this form?					Combir monthly	y income
		Yes. Explain: Debtor's husband's business sufferred a significanticipates a steady growth in her husband's business payments.						

Official Form 106l Schedule I: Your Income page 2

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Debtor 1	Noviello, Susan A.	Case number (if known)	3:22-bk-15727

Official Form B 6I Attachment for Additional Employment Information

Dahtan		
Debtor	Appletant	
Occupation	Assistant	
Name of Employer	Corporate Toddlers, Inc.	
How long employed	6 months	
Address of Employer	4900 Route 33	
	Wall, NJ 07719	
Debtor		
	Appletant	
Occupation	Assistant	
Name of Employer	Vatsala Bhaskar, MD PA	
How long employed	14 years	
Address of Employer	57 Schanck Rd Ste C14	
, ,	Freehold, NJ 07728-3072	

Official Form 106l Schedule I: Your Income page 3

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United States Bankruptcy Court
District of New Jersey, Trenton Division

IN RE:		Case No. 3:22-bk-15727				
Noviello, Susan A.			Chapter 13			
Debtor(s)						
BUSINE	ESS INCOME AND EXPENSI	ES				
FINANCIAL REVIEW OF THE DEBTOR'S BU	ISINESS (Note: ONLY INCLUD	E informat	tion directly re	lated to	the business	
operation.)						
PART A - GROSS BUSINESS INCOME FOR THE	PREVIOUS 12 MONTHS:					
1. Gross Income For 12 Months Prior to Filing:		\$	220,000.00			
PART B - ESTIMATED AVERAGE FUTURE GRC	OSS MONTHLY INCOME:					
2. Gross Monthly Income:				\$	18,333.00	
PART C - ESTIMATED FUTURE MONTHLY EXI	PENSES:					
 Net Employee Payroll (Other Than Debtor) Payroll Taxes Unemployment Taxes Worker's Compensation Other Taxes Inventory Purchases (Including raw materials) Purchase of Feed/Fertilizer/Seed/Spray Rent (Other than debtor's principal residence) Utilities Office Expenses and Supplies Repairs and Maintenance Vehicle Expenses Travel and Entertainment Equipment Rental and Leases Legal/Accounting/Other Professional Fees Insurance Employee Benefits (e.g., pension, medical, etc.) Payments to be Made Directly by Debtor to Sec Business Debts (Specify): 		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,814.00			
21. Other (Specify): Contract Labor	4,333.00	\$	4,333.00			
22. Total Monthly Expenses (Add items 3-21)				\$	13,688.00	
PART D - ESTIMATED AVERAGE <u>NET</u> MONTH	LY INCOME					
23. AVERAGE NET MONTHLY INCOME (Sul	btract Item 22 from Item 2)			\$	4,645.00	

Fill in	n this informa	ation to identify you	ır case:						
Debto		Susan A. Nov				Ch	eck if this is An amen		
Debto	or 2 use, if filing)				_				ng postpetition chapter 13 ollowing date:
		ruptcy Court for the:	DISTRICT DIVISION	OF NEW JERSEY, TR	ENTON		MM / DD		onowing date.
Case (If kno		:22-bk-15727							
		orm 106J				1			
		J: Your E							12/1:
infor (if kr	mation. If mown). Answ	nore space is need wer every question ribe Your Househ	ded, attach n.	wo married people are another sheet to this fo					upplying correct ir name and case numbe
1.	Is this a join								
	_	es Debtor 2 live in	a separate	household?					
			file Official	Form 106J-2, Expenses	for Separate Househ	holdof Deb	tor 2.		
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	YAS	ill out this information for ach dependent	Dependent's relat Debtor 1 or Debto		Depei age	ndent's	Does dependent live with you?
	Do not state dependents				Daughter		23		□ No ■ Yes
					Daughter		21		□ No ■ Yes
					Daughter		17		□ No ■ Yes □ No
2	Do wow ov	managa ingleda	_		Son		15		■ Yes
	expenses of	penses include of people other that od your dependen		•					
expe	nate your e	a date after the ba	ır bankrupt	Expenses cy filing date unless yo s filed. If this is a supple					
valu		ssistance and hav		vernment assistance if y it on Schedule I: Your I				Your expe	enses
4.		or home ownershind any rent for the o		s for your residence. In	clude first mortgage	4.	\$		2,429.02
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
	•	erty, homeowner's,				4b.	· —		0.00
		e maintenance, rep				4c.	·		250.00
5.		eowner's associatio mortgage paymer		ninium dues residence, such as hom	ne equity loans	4d. 5.	·		0.00

Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning conal care products and services lical and dental expenses asportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations arance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: ess. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ 5	375.00 120.00 620.00 0.00 800.00 150.00 100.00 50.00 0.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning sonal care products and services lical and dental expenses asportation. Include gas, maintenance, bus or train fare. loot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations lical insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: less. Do not include taxes deducted from your pay or included in lines 4 or 20.	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	120.00 620.00 0.00 800.00 150.00 100.00 550.00
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning sonal care products and services lical and dental expenses asportation. Include gas, maintenance, bus or train fare. loot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rrance. loot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: less. Do not include taxes deducted from your pay or included in lines 4 or 20.	6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	620.00 0.00 800.00 0.00 150.00 50.00 550.00
Other. Specify: d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning sonal care products and services lical and dental expenses asportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rrance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20.	6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 800.00 0.00 150.00 100.00 50.00
d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning conal care products and services lical and dental expenses resportation. Include gas, maintenance, bus or train fare. rot include car payments. retainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rrance. rot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: res. Do not include taxes deducted from your pay or included in lines 4 or 20.	7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	800.00 0.00 150.00 100.00 50.00 550.00
dcare and children's education costs hing, laundry, and dry cleaning conal care products and services lical and dental expenses asportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations france. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: ess. Do not include taxes deducted from your pay or included in lines 4 or 20.	8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 150.00 100.00 50.00 550.00
hing, laundry, and dry cleaning conal care products and services lical and dental expenses asportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations arance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20.	9. 10. 11. 12. 13. 14.	\$	150.00 100.00 50.00 550.00
sonal care products and services lical and dental expenses asportation. Include gas, maintenance, bus or train fare. and include car payments. extrainment, clubs, recreation, newspapers, magazines, and books extrainment, clubs and religious donations extraince. and include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: ess. Do not include taxes deducted from your pay or included in lines 4 or 20.	10. 11. 12. 13. 14. 15a. 15b.	\$ \$ \$ \$	100.00 50.00 550.00 0.00
ical and dental expenses insportation. Include gas, maintenance, bus or train fare. into include car payments. irrainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations irrance. into include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: ies. Do not include taxes deducted from your pay or included in lines 4 or 20.	11. 12. 13. 14. 15a. 15b.	\$ \$ \$	100.00 50.00 550.00 0.00
Insportation. Include gas, maintenance, bus or train fare. Intended to include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books Intertainment, clubs, recreation, newspapers, magazines, and books Intended to include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Intertain include in lines 4 or 20.	12. 13. 14. 15a. 15b.	\$ 5	550.00 0.00
Insportation. Include gas, maintenance, bus or train fare. Intended to include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books Intertainment, clubs, recreation, newspapers, magazines, and books Intended to include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Intertain include in lines 4 or 20.	13. 14. 15a. 15b.	\$	550.00 0.00
not include car payments. Pertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations Irance. Not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Des. Do not include taxes deducted from your pay or included in lines 4 or 20.	13. 14. 15a. 15b.	\$	0.00
ritable contributions and religious donations rance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: as. Do not include taxes deducted from your pay or included in lines 4 or 20.	14. 15a. 15b.	-	
rance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20.	15a. 15b.	\$	0.00
not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: as. Do not include taxes deducted from your pay or included in lines 4 or 20.	15b.		0.00
Life insurance Health insurance Vehicle insurance Other insurance. Specify: as. Do not include taxes deducted from your pay or included in lines 4 or 20.	15b.		
Health insurance Vehicle insurance Other insurance. Specify: as. Do not include taxes deducted from your pay or included in lines 4 or 20.	15b.	c	
Vehicle insurance Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
Other insurance. Specify: Solution Specify: Other insurance. Specif		· · · · · · · · · · · · · · · · · · ·	300.00
es. Do not include taxes deducted from your pay or included in lines 4 or 20.	15c.	\$	225.00
	15d.	\$	0.00
	16.	\$	0.00
allment or lease payments:			
Car payments for Vehicle 1	17a.	·	255.00
Car payments for Vehicle 2	17b.	\$	0.00
Other. Specify:	17c.	\$	0.00
Other. Specify:	17d.	\$	0.00
r payments of alimony, maintenance, and support that you did not report as		•	0.00
ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
er payments you make to support others who do not live with you.	40	\$	0.00
cify: er real property expenses not included in lines 4 or 5 of this form or on <i>Sched</i> u	19.	ur Incomo	
Mortgages on other property	20a.		0.00
			0.00
		·	0.00
			0.00
		·	0.00
		·	
		.ψ	0.00
· · · · · · · · · · · · · · · · · · ·		•	0.004.00
S .			6,224.02
		l <u> </u>	
Add line 22a and 22b. The result is your monthly expenses.		\$	6,224.02
Copy line 12 (your combined monthly income) from Schedule I.			5,162.66
copy mile 12(year commented membry meeting) meeting	23b.	-\$	6,224.02
, ,			,
Copy your monthly expenses from line 22c above.		\$	-1,061.36
	Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: culate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above.	Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20d. Homeowner's association or condominium dues 20e. Per: Specify: 21. Sulate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. Sulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. 23a.	Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues 20e. \$ 21. +\$ culate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. \$ culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income.

☐ No.

Yes.

Explain here: Debtor's husband's business sufferred a significant loss due to the Covid-19 Pandemic. Debtor anticipates a steady growth in her husband's business, which will assist in making her plan payments.

		our case:			
Debtor 1	nformation to identify yo Susan A. Noviell				
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	DISTRICT OF NEW J	ERSEY, TRENTON DIVISION		
Case number	3:22-bk-15727				
f known)					Check if this is an amended filing
taining money		connection with a ban	es or amended schedules. Ma kruptcy case can result in fin		
Sia	ın Below				
	n Below ay or agree to pay some	one who is NOT an atto	rney to help you fill out bank	ruptcy forms?	
		one who is NOT an atto	rney to help you fill out bank	ruptcy forms?	
Did you pa ■ No		one who is NOT an atto	rney to help you fill out bank	Attach <i>Bank</i>	ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
Did you pa No Yes. N	ny or agree to pay some Name of person		rney to help you fill out bank	Attach Bank Declaration,	and Signature (Official Form 119)
Did you pa No Yes. No Under pena	Name of person			Attach Bank Declaration,	and Signature (Official Form 119)
Did you pa No Yes. N Under pena that they are X /s/ Sus	Name of person alty of perjury, I declare true and correct.		nmary and schedules filed wi	Attach Bank Declaration, th this declaration	and Signature (Official Form 119)

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	Fill in th	nis information to identi	ify your case:			
Б.			-			
Deb	tor 1	Susan A. Noviel	Middle Name	Last Name		
Deb	tor 2					
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States B	ankruptcy Court for the:	DISTRICT OF NEW JER	SEY, TRENTON DIVISION		
Cas	e number	3:22-bk-15727				
(if kn		0.22 5.1 1012.				heck if this is an
					a	mended filing
∩ff	icial F	orm 107				
			Affaira far Individ	luala Eilina far D	ankrumtav	0.410.6
S ta	itemen	t of Financial	Affairs for Individ	duals Filling for B	ankruptcy	04/22
					qually responsible for supply	
		more space is needed, a wer every question.	attach a separate sheet to the	nis form. On the top of any	additional pages, write your r	name and case number
(II KI	iowiij. Alis	wer every question.				
Par	Give	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is yo	ur current marital statu	s?			
	■ Marrie	od.				
	☐ Not m	-				
	— 14001111	amou				
2.	During the	last 3 years, have you	lived anywhere other than w	here you live now?		
	■ No					
	_	ist all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.		
		' ,				
	Debtor 1:		Dates Debtor 1	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
				-	y property state or territory?	
siaie	s and territo	iries include Anzona, Cal	ilomia, idano, Louisiana, Nev	ada, New Mexico, Fuerto Kit	co, Texas, Washington and Wis	sconsin.)
	■ No					
	☐ Yes. N	Make sure you fill out Scho	edule H: Your Codebtors (Offic	cial Form 106H).		
Part	2 Expl	ain the Sources of You	r Income			
1	Did you ba	ve any income from en	anloyment or from operating	n a husiness during this ver	ar or the two previous calend	ar veare?
			u received from all jobs and a			ai years:
	If you are fi	ing a joint case and you h	nave income that you receive to	ogether, list it only once under	Debtor 1.	
	□ No					
		Fill in the details.				
	- 163.1	iii iii tile details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
_	_			,	_	and exclusions)
	•	1 of current year until led for bankruptcy:	■ Wages, commissions,	\$6,200.00	☐ Wages, commissions,	
	uate you II	ica for ballkruptcy.	bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Page 25 of 33 Debtor 1 Case number (if known) 3:22-bk-15727 Noviello, Susan A. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$11,530.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2021) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$6,561.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? □ No. ☐ Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☐ Yes. List all payments to an insider.

Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid

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8.	Within 1 year before you filed for bankruptc insider? Include payments on debts guaranteed or cosign		ments or transfer an	ny property on	account of a dek	ot that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment litor's name
Par	t 4: Identify Legal Actions, Repossessions	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptc List all such matters, including personal injury cand contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Jefferson Capital Sy Stems Llc vs. Susan Noviello DC00220021	Judgment	Superior Court Jerse 118 Washingto Toms River, N.	on St	☐ Pending☐ On appe☐ Conclud	eal
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address	Describe the Property			aisned, attached,	value of the property
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment beca No Yes. Fill in the details.			ıncial institutio	on, set off any am	nounts from your
	Creditor Name and Address	Describe the action the	e creditor took		ate action was ken	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an	y, was any of your propo other official?	erty in the possessio	on of an assign	nee for the benefi	t of creditors, a
	■ No □ Yes					
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gift	s with a total value o	of more than \$6	600 per person?	
	Gifts with a total value of more than \$600 p person	er Describe the gifts			ates you gave e gifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Noviello, Susan A.

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Debt	tor 1 Noviello, Susan A.			Case number (if known)	3:22-bk-15	5727
14.	Within 2 years before you filed for bankr	uptcv. di	d vou give any gifts or contribution	s with a total value o	f more than \$6	600 to any charity?
	■ No □ Yes. Fill in the details for each gift or co				,	,
	Gifts or contributions to charities that is more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cook		Describe what you contributed		s you ributed	Value
Part	6: List Certain Losses					_
	Within 1 year before you filed for bankru or gambling?	iptcy or s	since you filed for bankruptcy, did yo	ou lose anything bed	ause of theft,	fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. Loc claims on line 33 of Schedule A/B: H	ist pending loss	of your	Value of property lost
Part	7: List Certain Payments or Transfer	s				
(Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition pr No Yes. Fill in the details. Person Who Was Paid Address Email or website address	preparing	g a bankruptcy petition?	es required in your bar	payment or	Amount of payment
	Person Who Made the Payment, if Not \	ou/		maue	,	
-	Straffi & Straffi 670 Commons Way Toms River, NJ 08755-6431		Professional Services	06/1	5/2022	\$600.00
ı	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that	ditors or	to make payments to your creditors		er any property	y to anyone who
	NoYes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	•	payment or efer was	Amount of payment
† ! !	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already liste. No Yes. Fill in the details.	ur busine made as	ss or financial affairs? security (such as the granting of a security			
	Person Who Received Transfer Address		Description and value of property transferred	Describe any pro payments receive paid in exchange	ed or debts	Date transfer was made

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

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	beneficiary? (These are often called asset-prot	ection devices.)				
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	truments Safe Denosit	Boyes and Str	orana Unite		maue
20.		y, were any financial acc	counts or instr	uments held		, ,
	houses, pension funds, cooperatives, assoc					amono, aronorago
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, ar	ny safe depo	osit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit o	or place other than your	home within 1	year before	you filed for bankrupte	cy?
	■ No					
	☐ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that sor someone.	meone else owns? Inclu	de any propert	y you borro	owed from, are storing t	for, or hold in trust for
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Info	ormation				
For	the purpose of Part 10, the following definitio	ns apply:				
-	Environmental law means any federal, state, toxic substances, wastes, or material into the controlling the cleanup of these substances.	or local statute or regu e air, land, soil, surface				

Debtor 1 Noviello, Susan A.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 22-15727-MBK Doc 10 Filed 08/09/22 Entered 08/09/22 21:29:59 Desc Main Page 29 of 33 Document Debtor 1 Noviello, Susan A. Case number (if known) 3:22-bk-15727 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο П Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Susan A. Noviello	
Susan A. Noviello Signature of Debtor 1	Signature of Debtor 2
Date August 9, 2022	Date

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Debtor 1 Noviello, Susan A. Case number (if known) 3:22-bk-15727

Titovicio, out	an A.		J.EE DK 101E1
Did you attach additional p	ages to Your Statement of Financial Affairs for	r Individuals Filing for Bankruptcy (Of f	icial Form 107)?
■ No			
☐ Yes			
Did you pay or agree to pa	y someone who is not an attorney to help you	fill out bankruptcy forms?	
■ No			
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's No	tice, Declaration, and Signature (Official	Form 119).

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Fill in this information to identify your case:							
Debtor 1	Susan A. Novielle	0					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF NEW JE	RSEY, TRENTON DIVISION				
Case number (if known)	3:22-bk-15727						

Official Form 423

Certification About a Financial Management Course

12/15

If you are an individual, you must take an approved course about personal financial management if:

- you filed for bankruptcy under chapter 7 or 13, or
- you filed for bankruptcy under chapter 11 and § 1141 (d)(3) does not apply.

In a joint case, each debtor must take the course. 11 U.S.C. §§ 727(a)(11) and 1328(g).

After you finish the course, the provider will give you a certificate. The provider may notify the court that you have completed the course. If the provider does notify the court, you need not file this form. If the provider does not notify the court, then Debtor 1 and Debtor 2 must each file this form with the certificate number before your debts will be discharged.

- If you filed under chapter 7 and you need to file this form, file it within 60 days after the first date set for the meeting of creditors under § 341 of the Bankruptcy Code.
- If you filed under chapter 11 or 13 and you need to file this form, file it before you make the last payment that your plan requires or before you file a motion for a discharge under § 1141(d)(5)(B) or § 1328(b) of the Bankruptcy Code. Fed. R. Bankr. P. 1007(c).

In some cases, the court can waive the requirement to take the financial management course. To have the requirement waived, you must file a

motion	with	the court and o	but the Required Course.	
You n	nust ch	eck one:		
	l co	mpleted an ap	proved course in personal financial management:	
	Dat	e I took the cou	rse	
	Nar	ne of approved _l	provider	
	Cer	tificate Number		
	I am not required to complete a course in personal financial management because the court has granted my motion for a waiver of the requirement based on (check one):			
		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finance	
		Disability.	My physical disability causes me to be unable to complete a course in personal financial management in person, by phone, through the internet, even after I reasonably tried to do so.	
		Active duty.	I am currently on active military duty in a military combat zone.	
		Residence.	I live in a district in which the United States trustee (or bankruptcy administrator) has determined that the approved instructional courses cannot adequately meet my needs.	
Part 2	Sig	n Here		
I certif	y that t	he information I	have provided is true and correct.	
		n A. Noviello		

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY
Caption in Compliance with D.N.J. LBR 9004-2(c)

STRAFFI & STRAFFI, LLC 670 Commons Way Toms River, NJ 08755 (732) 341-3800 (732) 341-3548(fax) bkclient@straffilaw.com Attorney for Debtor(s)

In re: Noviello, Susan A.

Case No.: 3:22-bk-15727

Chapter: 13

Judge:

Recommended Local Form: [X] Followed [] Modified

PRE-CONFIRMATION CERTIFICATION OF COMPLIANCE WITH POST-PETITION OBLIGATIONS IN ACCORDANCE WITH 11 U.S.C. SECTION 1325(a)(8) AND (a)(9)

- I, Noviello, Susan A., upon my oath according to law, hereby certify as follows:
 - 1. The below information is being supplied for compliance with the Confirmation Hearing date on ______.
 - 2. The above named Debtor(s) has /have paid all post petition amounts that are required to be paid under any and all Domestic Support Obligations.
 - 3. The above named Debtor(s) has/have filed all applicable Federal, State, and local tax returns, as required by 11 U.S.C. Section 1308.

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4. If the Confirmation hearing date stated in Paragraph 1 is adjourned for any reason, an updated Certification will be filed with the Court prior to any subsequent Confirmation hearing date in the event any of the information contained in this Certification changes.

I certify under penalty of perjury that the foregoing is true and correct.

Dated: August 9, 2022	/s/ Susan A. Noviello
	Signature of Debtor
Dated:	
	Signature of Joint Debtor